

POSITION	INITIALS	ID NO.	DATE
	<i>Phy</i>	<i>67614</i>	<i>12/10/55</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		<i>49</i>	<i>2/10/55</i>
FORMALITY REVIEW	<i>Phy</i>	<i>71423</i>	<i>1-14-55</i>
RESPONSE FORMALITY REVIEW	<i>Phy</i>	<i>71423</i>	<i>7/12/55</i>

### INDEX OF CLAIMS

✓	..... Rejected	N	..... Non-elected
=	..... Allowed	I	..... Interference
-	(Through numeral)..... Canceled	A	..... Appeal
+	..... Restricted	O	..... Objected

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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